

Indiana Birth Defects Surveillance - Form for Mandatory Physician Reporting ONLY FOR A NEW DIAGNOSIS MADE IN YOUR OFFICE (Children 0-3 and 5* years) Confidential under IC 16-38-4

Fax to: Indiana State Department of Health - (317)233-9271 State Form 51523 (R/7-04)

DIRECTIONS - PLEASE READ BEFORE YOU BEGIN:		
1 Print firmly and neatly. 3 Print capital letters only and numbers 4 Fill-in circles like this;		
2 Only use pens with blue or black ink. completely inside boxes: $[A_12_1C_13_1]$ Not like this: \bowtie		
SECTION 1: Child's Information		
Last Name Social Security Number (The social secutiry number is requested to provide further identification of the individual reported. The SSN is not required.)		
First Name Gender: O Male O Female O Undetermined		
Number & Street Address		
City State Zip Code		
County Date of Birth SECTION 2: Child's Diagnostic Information		
Description of Diagnosis(must be completed)/Comments/Notes or Additional Information		
Please provide the specific ICD-9-CM code required by the reportable conditions list (see reverse side).		
Principal ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis		
Date of Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis Secondary ICD-9-CM Diagnosis		
SECTION 3: Mother's Information		
Last Name First Name		
Maiden Name Date of Birth		
SECTION 4: Physician and Facility Information		
Physician's Last Name Physician's First Name		
Physician's Indiana License Number Physician's Specialty		
Facility Street Address and City		
Last Name of Person Completing Form First Name of Person Completing Form		
Phone Number Date Form Completed		

Reportable Conditions List

ICD-9-CM Diagnosis Codes	Categories of Congenital Anomalies
745.00-747.99	Cardiovascular
740.00-742.99	Central Nervous System
758.00-758.99	Chromosome and Syndromes
749.00-749.99	Cleft Palate and Cleft Lip
759.00-759.99	Congenital anomalies-Other and unspecified
744.00-744.99	Ear, Face and Neck
743.00-743.99	Eye
760.71*	Fetal alcohol syndrome (reported up to 5 years)
750.30-751.99	Gastrointestinal
752.00-753.99	Genitourinary
757.00-757.99	Integument
754.00-756.99	Musculoskeletal
748.00-748.99	Respiratory
750.00-750.29	Upper Alimentary Tract
ICD-9-CM Diagnosis Codes	Other Anomalies
212.30	Adenoma of lung or bronchus
524.00-524.10	Anomalies of jaw
335.00-335.99	Anterior horn cell disease
284.00	Aplastic anemia –Constitutional
299.00-299.99*	Autism, Childhood disintegrative disorder, Aspergers, Rett
	syndrome and Pervasive developmental disorders not otherwise
	stated (reported up to 5 years)
330.00-330.99	Cerebral degenerations usually manifest in childhood
286.00-286.50	Coagulation defects
379.51	Congenital nystagmus
250.00-250.99	Diabetes mellitus
246.10	Dyshormonogenic goiter
365.14	Glaucoma of childhood
282.00-282.99	Hemolytic anemias- Hereditary
279.00-279.99	Immune mechanism disorders
211.80	Mesothelioma of peritoneum
212.40	Mesothelioma of pleura
359.00-359.99	Muscular dystrophies and myopathies
289.80	Myelofibrosis-Acute
216.00-216.99 230.00-239.99	Neoplasms-Benign Skin
140.00-208.99	Neoplasms (Digestive Organs to Unspecified)
273.20	Neoplasms (Malignant Lip to Leukemia Unspecified) Paraproteinemias- Other
289.60	Polycythemia- Familial
362.70	Retinal dystrophies-Hereditary
362.70	Retrolental fibroplasia
378.00-378.99	Strabismus and other disorders of binocular eye movement
257.80	Testicular dysfunction- Other
287.30	Thrombocytopenia- Primary
273.30	Waldenstrom's macroglobulinemia
288.00-288.99	White blood cell diseases

 $For \ additional \ information, \ please \ visit: \ \underline{www.in.gov/isdh/programs/ibdpr}$